



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

11/20/2007

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NJ0000027193

INSTALLATION NAME: CLEAN VENTURE INC

INSTALLATION ADDRESS : 201 S FIRST ST
ELIZABETH, NJ 07206

MAILING ADDRESS : 201 S FIRST ST
ELIZABETH, NJ 07206

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel: (212) 637-4106
Fax: (212) 637-4437**

**TO: CLEAN VENTURE INC
or Current Occupant
ATTN: RUTH OSOLIN
201 S FIRST ST
ELIZABETH, NJ, 07206**

Change updated

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		17 21 4:38
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #____) <input type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (page 14)	EPA ID Number <u>NJ000000271193</u>		
3. Site Name (page 14)	Name: <u>Clean Venture Inc</u>		
4. Site Location Information (page 14)	Street Address: <u>201 South First Street</u>		
	City, Town, or Village: <u>Elizabeth</u>	State: <u>NJ</u>	
	County Name: <u>Union</u>	Zip Code: <u>07206</u>	
5. Site Land Type (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	A. <u>484230</u>	B. <u>562910</u>	
	C. <u> </u>	D. <u> </u>	
7. Site Mailing Address (page 15)	Street or P. O. Box: <u>201 South First Street</u>		
	City, Town, or Village: <u>Elizabeth</u>		
	State: <u>NJ</u>		
	Country: <u>Union</u>	Zip Code: <u>07206</u>	
8. Site Contact Person (page 15)	First Name: <u>Ruth</u>	Last Name: <u>Osolin</u>	
	Phone Number: <u>908-355-5800</u> Extension: <u>237</u>	Email address: <u>Ruth.Osolin@cleanventure.com</u>	
9. Operator and Legal Owner of the Site (pages 15 and 16)	A. Name of Site's Operator: <u>Cleanventure Inc</u>		Date Became Operator (mm/dd/yyyy): <u>5-1995</u>
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: <u>Cleanventure</u>		Date Became Owner (mm/dd/yyyy): <u>5-95</u>
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>201 South First Street</u>	
	City, Town, or Village: <u>Elizabeth</u>	
	State: <u>NJ</u>	
	Country: <u>Union</u>	Zip Code: <u>07206</u>

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities
Complete all parts for 1 through 6.

☒ **1. Generator of Hazardous Waste**
If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or

☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or

☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

☐ **d. United States Importer of Hazardous Waste**

☐ **e. Mixed Waste (hazardous and radioactive) Generator**

☒ **2. Transporter of Hazardous Waste**

☒ **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity.

☒ **4. Recycler of Hazardous Waste (at your site)**

☒ **5. Exempt Boiler and/or Industrial Furnace**
If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner Exemption

☐ b. Smelting, Melting, and Refining

☐ **6. Underground Injection Control**

B. Universal Waste Activities

☐ **1. Large Quantity Handler of Universal Waste** (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste that apply:

	<u>Manage</u>
a. Batteries	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>
d. Lamps	<input checked="" type="checkbox"/>
e. Other (specify) <u>household hazardous waste</u>	<input checked="" type="checkbox"/>
f. Other (specify) <u>waste</u>	<input type="checkbox"/>
g. Other (specify) <u>Transporter</u>	<input checked="" type="checkbox"/>

☐ **2. Destination Facility for Universal Waste**
Note: A hazardous waste permit may be required for this activity.

Cycle Chem Inc, Elizabeth NJ

C. Used Oil Activities
Mark all boxes that apply.

☒ **1. Used Oil Transporter - Contaminated**
If "Yes", mark each that applies.

☒ a. Transporter

☐ b. Transfer Facility

☐ **2. Used Oil Processor and/or Re-refiner**
If "Yes", mark each that applies.

☐ a. Processor

☐ b. Re-refiner

☐ **3. Off-Specification Used Oil Burner**

☒ **4. Used Oil Fuel Marketer**
If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner

☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D004	D008	D001				
		F003				
D005	D009	D002				
D006	F003					

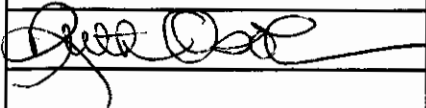
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

NONE						

12. Comments (See instructions on page 21.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Ruth Osolin / Branch manager	10/6/07

October 16, 2007

US EPA Region 2
Division of Environmental Planning & Protection RCRA Programs Branch
290 Broadway, 22 Floor
New York, New York 10007-1866

Attention: Ms. Carrie Smith

Dear Ms. Smith,

As per our telephone conversation enclosed please find the paperwork filled out for the subsequent notification.

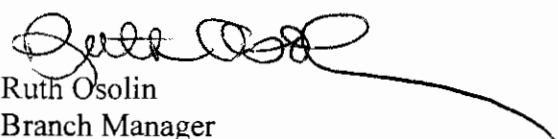
As I indicated to you on the phone, we need a letter from the EPA on their letterhead stating our EPA ID# in order to be able to transport for a large generator who is asking for this.

Unfortunately, we no longer have the original letter.

If after reviewing the enclosed you have any questions, please do not hesitate to contact me at 908-355-5800.

Sincerely,

CLEAN VENTURE, INC.


Ruth Osolin
Branch Manager

Encl.

Corporate Office:
201 South First Street
Elizabeth, NJ 07206
908-355-5800
FAX: 908-355-3495

North Jersey Office:
201 South First Street
Elizabeth, NJ 07206
908-354-0210
FAX: 908-354-9731

New Jersey TSDF:
217 South First Street
Elizabeth, NJ 07206
908-355-5800
FAX: 908-355-0562

South Jersey Office:
600 Cenco Boulevard
Clayton, NJ 08312
856-863-8778
FAX: 856-863-3725

Maryland Office:
2031 Inverness Avenue
Baltimore, MD 21230
410-368-9170
FAX: 410-368-9171

Massachusetts TSDF:
General Chemical
133-138 Leland Street
Framingham, MA 01702
508-872-5000
FAX: 508-875-5271

Massachusetts Office:
133-138 Leland Street
Framingham, MA 01702
508-872-5000
FAX: 508-875-5271

Connecticut Office:
One Dock Street
Stamford, CT 06902
203-969-2800
FAX: 203-969-2264


Pennsylvania TSDF:
550 Industrial Drive
Lewisberry, PA 17339
717-938-4700
FAX: 717-938-3301

Change (operator)

ALL SECTIONS MUST BE COMPLETED

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2060-0028. 7 expires 6-31-93
GSA No. 0246-EPA-07

<p>Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).</p>		 EPA		Notification of Regulated Waste Activity		Date Received (For Official Use Only)				
United States Environmental Protection Agency										
I. Installation's EPA ID Number (Mark X in the appropriate box)										
<input type="checkbox"/> A. First Notification		<input checked="" type="checkbox"/> B. Subsequent Notification (complete item C)		C. Installation's EPA ID Number						
				NJ00000027193						
II. Name of Installation (include company and specific site name)										
CLEAN VENTURE INC.										
III. Location of Installation (Physical address not P.O. Box or Route Number)										
Street MUST HAVE BUILDING NUMBER OR ADDITIONAL DESCRIPTION										
201 SOUTH FIRST STREET										
Street (continued)										
City or Town				State	ZIP Code					
ELIZABETH				NJ	07206-					
County Code	County Name									
	UNION									
IV. Installation Mailing Address (See Instructions)										
Street or P.O. Box										
SAME										
City or Town				State	ZIP Code					
					-					
V. Installation Contact (Person to be contacted regarding waste activities at site)										
Name (last)				(first)						
PERSICO				MICHAEL						
Job Title				Phone Number (area code and number)						
PRESIDENT				908-355-5800						
VI. Installation Contact Address (See Instructions)										
A. Contact Address Location		B. Street or P.O. Box								
City or Town				State	ZIP Code					
					-					
VII. Ownership (See Instructions)										
A. Name of Installation's Legal Owner (LANDLORD) (PROPERTY OWNER)										
201 SOUTH FIRST STREET CORP.										
Street, P.O. Box, or Route Number										
201 S 1ST ST										
City or Town				State	ZIP Code					
ELIZABETH				NJ	07206-					
Phone Number (area code and number)				B. Land Type	C. Owner Type	D. Change of Owner Indicator		(Date Changed)		
UNK-				0	0	Yes No		Month	Day	Year

FROM: JACK HOYT, EPA REGION 2, 290 BROADWAY
10TH FLOOR

ID - For Official Use Only																									
VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)																									
A. Hazardous Waste Activity 1. Generator (See instructions) <input type="checkbox"/> a. Greater than 1000 kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input checked="" type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input checked="" type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify _____ <input type="checkbox"/> 3. Transfer, Store, Dispose (at installation) Note: A permit is required for this activity. See instructions. <input type="checkbox"/> 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Boiler and/or Industrial Furnace <input type="checkbox"/> 1. Smelter/Refinery <input type="checkbox"/> 2. Small Quantity Exemption Indicate Type of Combustion Device(s) <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control	B. Used Oil Fuel Activities 1. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Burner - Indicate oil type(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 2. Specification Used Oil Fuel Markers (or On-site Burner) Who First Claims the Oil Meets the Specification																								
IX. Description of Regulated Wastes (Use additional sheets if necessary)																									
A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) 1. Ignitable (D001) <input type="checkbox"/> 2. Corrosive (D002) <input type="checkbox"/> 3. Reactive (D003) <input type="checkbox"/> 4. Toxicity Characteristic (D000) <input type="checkbox"/> (List specific EPA hazardous waste numbers for the Toxicity characteristic containers)																									
B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.) <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 16.6%;">1</td><td style="width: 16.6%;">2</td><td style="width: 16.6%;">3</td><td style="width: 16.6%;">4</td><td style="width: 16.6%;">5</td><td style="width: 16.6%;">6</td></tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>		1	2	3	4	5	6							7	8	9	10	11	12						
1	2	3	4	5	6																				
7	8	9	10	11	12																				
C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.) <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 16.6%;">1</td><td style="width: 16.6%;">2</td><td style="width: 16.6%;">3</td><td style="width: 16.6%;">4</td><td style="width: 16.6%;">5</td><td style="width: 16.6%;">6</td></tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>		1	2	3	4	5	6																		
1	2	3	4	5	6																				
X. Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.																									
Signature ORIGINAL OF GENERATOR BLUE INK <i>Thomas K. Hunt</i>	Name and Official Title (type or print) Thomas K. Hunt, Transportation Manager	Date Signed 5/12/95																							
XI. Comments FORMERLY FELDMAN CO Feldman Co is no longer at this address.																									
Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)																									

NS 151



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

05/29/95

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJ0000027193

FACILITY NAME -> CLEAN VENTURE INC

MAILING ADDRESS -> 201 S FIRST ST
ELIZABETH, NJ 07206

INSTALLATION ADDRESS -> 201 S FIRST ST
ELIZABETH, NJ 07206

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: PERSICO, MICHEAL
PRES
CLEAN VENTURE INC
201 S FIRST ST
ELIZABETH, NJ 07206

FEB 18 1998

Jack,

there may be a problem with
this application. The
REQUESTOR is using Clean
Ventures ID #. We
contacted Clean Venture. They
are not changing their name.
Please be advised.

Fed

NDREG

UNIV. OF SOUTHERN

603-252-7001

Becky,

2/17/97

FEB 17 1998

FEB 17 1998

Call them. - Has Clean
Venture changed it's name -
if not give Back to me

thanks

Ferd

Ferd,
This # is
assigned to
Clean Venture
in Elizabeth
? ? ?

Becky

ENVIRONMENTAL PROTECTION
AGENCY
90 FEB 25 PM 3:35
NECA-PAUL CHAPPELL, BR

Ferd,

Clean Venture is not changing
their name as per Jonathan Chewey FEB 18 1998



To avoid delays in processing, please complete all sections.
Only original signature of the Generator is acceptable.

Please print or type with ELITE

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

122397

Fedexp

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

NJ00000027193

II. Name of Installation (Include company and specific site name)

ALLSTATE LEGAL

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street

1 COMMERCE DRIVE

Street (Continued)

City or Town

CRANFORD

State

Zip Code

NJ 07016

COUNTY CODE

County Name

039 UNION

IV. Installation Mailing Address

Street or P.O. Box

SAME

City or Town

State

Zip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

GELSLECHTER

JACK

Job Title

Phone Number (Area Code and Number)

MANAGER

908-272-0800

VI. Installation Contact Address

A. Contract Address
Location Mailing Other

B. Street or P.O. Box

☒☐☐

City or Town

State

Zip Code

VII. Ownership PROPERTY

A. Name of Installation's Legal Owner

JAROD REALITY COMPANY

Street, P.O. Box, or Route Number

1 COMMERCE DRIVE

City or Town

State

Zip Code

CRANFORD

NJ 07016

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)

908-272-0800

P

P

Yes

No

Month

Day

Year

From: Jack Hoyt, AWM, EPA, Region 2, 290 Broadway, 22 Fl.
New York, NY 10007-1866. Tel: (212) 637 4106

* RCRIS: Add/Update/Delete Comments Screen *

* EPA ID: NJ0000027193 Other ID: Source: N *
*
* Action Comments: *
*
* THIS ID NUMBER WAS ISSUED IN ERROR TO *
* ALL-STATE LEGAL SUPPLY CO. THIS EPA ID *
* NUMBER NJ0000027193 BELONGS TO CLEAN *
* VENTURE INC. ALL-STATE SHOULD HAVE BEEN *
* REISSUED ITS ORIGINAL EPA ID NUMBER *
* NJD060792801. *
*
*
*
*
*
*

Enter-Continue F3-Exit F4-Exit Group Process
* F9-First F10-Next *

* RCRIS: Quick Search View Screen 2 of 3 *

* PAGE: 1 OF 1 *
*MARK HANDLER ID # HANDLER NAME LOCATION STREET CITY *
*-----
* NJD060792801 ALL-STATE LEGAL SUPPLY 1 COMMERCE DR CRANFORD *
* NJD982741506 COLOR GRAPHICS INC 101 COMMERCE DR MOORESTOWN *
* NJD986631943 HEIDELBERG EASTERN INC 21 COMMERCE DR CRANBURY *
* NJD986640647 HARDWARE INDUSTRIAL TO 1 COMMERCE DR DELANCO *
* NJR000018010 GRAPHIC SYSTEMS INC 301 COMMERCE DR MOORESTOWN *
* NJR000021550 VOLKSWAGEN OF AMERICA 1 COMMERCE DR CRANBURY *
* NJ0000027193 ALLSTATE LEGAL 1 COMMERCE DR CRANFORD *
* *
* *
* *
* *
* *
* *

* Enter-Cont F2-Return F3-Exit F9-Top F10-Next F11-Previous *
* F12-Full Name *



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

12/29/97

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJ0000027193

FACILITY NAME -> ALLSTATE LEGAL

MAILING ADDRESS -> 1 COMMERCE DR
CRANFORD, NJ 07016

INSTALLATION ADDRESS -> 1 COMMERCE DR
CRANFORD, NJ 07016

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: GELSLEICHTER, JACK
MANAGER
ALLSTATE LEGAL
1 COMMERCE DR
CRANFORD, NJ 07016



Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

Comments

Epp Mail

P	F	E	L	D	M	A	N	+	S	O	N	S
---	---	---	---	---	---	---	---	---	---	---	---	---

[illegible]

C	E	L	I	Z	A	B	E	T	H									N	J	0	7	2	0	6
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[illegible]

C	E	L	I	Z	A	B	E	T	H								N	J	0	7	2	0	6
---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	---	---	---	---	---	---	---

C														area code and number																
2	W	I	T	Z	E	R	A	L	A	N	Y	P									9	0	8	3	5	2	0	0	4	3

[illegible]

<input checked="" type="checkbox"/> 1a. Generator	<input type="checkbox"/> 1b. Less than 1,000 kg/mo.	<input type="checkbox"/> 6. Off-Specification Used Oil Fuel
<input type="checkbox"/> 2. Transporter		<input type="checkbox"/> a. Generator Marketing to Burner
<input type="checkbox"/> 3. Treater/Storage/Disposer		<input type="checkbox"/> b. Other Marketer
<input type="checkbox"/> 4. Underground Injection		<input type="checkbox"/> c. Burner
<input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel		<input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On site Burner)
(enter 'X' and mark appropriate boxes below)		Who First Claims the Oil Meets the Specification
<input type="checkbox"/> a. Generator Marketing to Burner		
<input type="checkbox"/> b. Other Marketer		
<input type="checkbox"/> c. Burner		

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ C Industrial Furnace

VIII. Mode of Transportation (transporters only - enter 'X' in the appropriate box(es))

☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

Continue on reverse

ID - For Official Use Only																
C															T/A	C
W																

X. Description of Hazardous Wastes (continued from front)																							
A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.																							
1				2				3				4				5				6			
D 0 0 8																							
7				8				9				10				11				12			
B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.																							
13				14				15				16				17				18			
19				20				21				22				23				24			
25				26				27				28				29				30			
C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.																							
31				32				33				34				35				36			
37				38				39				40				41				42			
43				44				45				46				47				48			
D. Listed Infectious Wastes. Enter the four-digit number 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.																							
49				50				51				52				53				54			
E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)																							
<input type="checkbox"/> 1. Ignitable (D001) <input type="checkbox"/> 2. Corrosive (D002) <input type="checkbox"/> 3. Reactive (D003) <input checked="" type="checkbox"/> 4. Toxic (D000)																							

XI. Certification		
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.		
Signature <i>Alan Witzer</i>	Name and Official Title (type or print) ALAN WITZER V.P.	Date Signed 10/13/93
Estimated burden: Public reporting burden for this collection of information is estimated to be 3 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.		

Preferred Tank Services

Preferred Tank Testing, Inc.

(201) 492-0890

(800) 924-TANK

Ms. Betsy Lopez
EPA Region II
Air & Waste Management Division
RCRA Notifications
26 Federal Plaza, Room 505
New York, NY 10278

NJ 000 0027193

**RE: P. Feldman & Sons
Alan Witzer, VP
201 South First Street
Elizabeth, NJ 07206**

October 12, 1993


Dear Ms. Lopez,

Enclosed is the original Notification of Hazardous Waste Activity form for the above facility.

This notification was also transmitted via "FAX" on October 12, 1993.

Please issue the generator number on a priority basis and inform at the earliest possible time, so proper disposal of these wastes can proceed within the time frame required by NJDEPE.

Thank you for your consideration in this matter.


John F. Donohue
President

JFD/1h
enc.

1250 Route 23 North • Butler, NJ 07405



HOTELS · RESORTS · SUITES

U.S. EPA
AGENCY ROOM
New Jersey Textile Services

65 Mayfield Avenue
Edison, New Jersey 08837
908/225-0512
Fax: 908/225-0593

98 OCT 21 PM 2:49

HAZARDOUS & SOLID WASTE
PROGRAMS BRANCH

Oct. 16, 1998

Mr. J. HOYT
United States Environmental Protection Agency
Region 2
290 Broadway
New York, New York 10007-1866

Dear Sir:

Please deactivate our EPA # NJ0000027193 as our work
has been completed.

Thank you,

Lewis CAMPANELLA

cc: John O'NEILL

```

*****
*                               RCRIS: Notification View Screen 2 of 6                               *
*****
*EPA ID: NJ0000027193      Other ID:                               Merge Send: Y                      *
*Date Received(MMDDYY): 122497   Source( N/E/S ): E Non-Notifier Flag:                      *
*Date Acknowledged (MMDDYYYY): 03021998   Send Acknowledgement:                      *
*Name of Installation: CLEAN VENTURE INC                      *
*                               Installation Location Address                               *
*Streets: 201 S 1ST ST                      *
*City: ELIZABETH                               State: NJ      Zip: 07206                      *
*County Code: 039      County Name: UNION                      *
*                               Installation Mailing Address                               *
*Streets: 201 S 1ST ST                      *
*City: ELIZABETH                               State: NJ      Zip: 07206                      *
*                               Contact Information                               *
*   Last Name      First Name      Title      Phone      Address(M,L,O) *
*                               *
*Streets:                      *
*City:                               State:      Zip:                      *
*Land Type: P                      *
*****
* Enter-Continue      F1-Previous Screen      F3-Exit                      *
*****

```

Shows this facility ID # was
deactivated 12-24-97.
cover letter fails to provide name
and address of facility.


```

*****
*                               RCRIS: Notification View Screen 4A of 6                               *
*****
* EPA ID:  NJ0000027193      Other ID:                               Source:  E                               *
*                                                                                                     *
*                               RCRA Reg  RCRA Reg  State Reg  State Reg                               *
* Waste Activity              Type    Status   Desc      Status   Desc                               *
* -----
* HW Generator:              1        R                               *
* HW TSD:                                                             *
* HW Transporter:           C        R                               *
*   Transport Mode:  Air:      Rail:      Highway:      Water:      *
*                   Other:                                           *
* HW Burner/Blender:                                               *
* NHW Used Oil Recycler:                                           *
* -----
* Underground Injection Control:                                     *
* Recycler:                                                         *
*                                                                                                     *
*****
* Enter-Continue      F1-Previous Screen      F3-Exit      F8-Help      *
*****

```



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

10/18/93

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJ0000027193

FACILITY NAME -> P FELDMAN & SONS

MAILING ADDRESS -> 201 S 1ST ST
ELIZABETH, NJ 07206

INSTALLATION ADDRESS -> 201 S 1ST ST
ELIZABETH, NJ 07206

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: WITZER, ALAN
VICE PRES
P FELDMAN & SONS
201 S 1ST ST
ELIZABETH, NJ 07206

Established 1905

VERNAL CORP. T/A

(201) 352-0042

P. FELDMAN & SONS
IRON, STEEL AND METAL SCRAP

ENVIRONMENTAL PROTECTION
AGENCY REGION II

JAN 10 PM 3:32

HAZARDOUS WASTE
PROGRAMS BRANCH

P.O. Box 122
201 South First Street, Elizabeth, N.J. 07206

January 6, 1994

Bureau of Manifest and Information Systems
New Jersey Dept. of Environmental
Protection and Energy
Hazardous Waste Regulation Program
401 E. State Street., CN-421
Trenton, NJ 08625-0421

Re: US EPA Generator ID
NJ 000027193
0

Dear Sir/Madam,

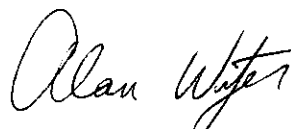
Due to disposal of Contaminated Soils undertaken associated with the Closure of an Underground Storage Tank, the above Generator Number was assigned.

As this was a one time event and all Hazardous Waste Activity for this site is complete, we request this number be delisted.

Thank you for your attention to this request.

Sincerely,

Vernal Corp T/A
P. Feldman & Sons



Alan Witzer
Vice President

CC: US EPA Region 11
Air & Waste Mangmt Div.
Attn: RCRA Notifications
26 Federal Plaza Rm 1006
NY, NY 10278

P. FELDMAN & SONS

IRON, STEEL AND METAL SCRAP

P.O. Box 122

201 South First Street, Elizabeth, N.J. 07206

January 6, 1994

Bureau of Manifest and Information Systems
New Jersey Dept. of Environmental
Protection and Energy
Hazardous Waste Regulation Program
401 E. State Street., CN-421
Trenton, NJ 08625-0421

Re: US EPA Generator ID
NJ 000027193

Dear Sir/Madam,

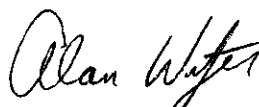
Due to disposal of Contaminated Soils undertaken associated with the Closure of an Underground Storage Tank, the above Generator Number was assigned.

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Thank you for your attention to this request.

Sincerely,

Vernal Corp T/A
P. Feldman & Sons



Alan Witzer
Vice President

1/R = 1 N 10
3/15/95 BO

CC: US EPA Region 11
Air & Waste Mangmt Div.
Attn: RCRA Notifications
26 Federal Plaza Rm 1006
NY, NY 10278

JOEL Golumbelk
EPA



Redd
4/22

Christine Todd Whitman
Governor

State of New Jersey
Department of Environmental Protection

Robert C. Shinn, Jr.
Commissioner

APR 19 1996

Tim/Dart



NJ0000027193

P.

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

CLEAN VENTURE
201 SOUTH FIRST STREET
ELIZABETH, NJ 07206

ATTENTION: MICHAEL PERSICO

Dear Mr. Persico:

There is enclosed for service upon you a **NOTICE OF CIVIL ADMINISTRATIVE PENALTY ASSESSMENT** issued by the New Jersey Department of Environmental Protection pursuant to the provisions of the Solid Waste Management Act.


The Department is available to meet with the principals of the case to discuss the enclosed enforcement document. All requests for meetings must be in writing and must include an agenda of items to be discussed at the meeting. Should you desire such a meeting please write to Jeffrey A. Sterling at the address listed below:

New Jersey Department of Environmental Protection
Solid and Hazardous Waste Enforcement
Bureau of Hazardous Waste Enforcement - Metro
2 Babcock Pl.
W. Orange, NJ 07052-5504
Attention: Jeffrey A. Sterling, Acting Section Chief

Be advised that this does not affect the time frame within which you may request an administrative hearing, under the Notice of Right to a Hearing provisions of the enclosed document.

Should you have any questions concerning this matter, please contact Mr. Sterling at (201) 669-3900.

Sincerely,


Charles E. Deweese, Administrator
Solid and Hazardous Waste Enforcement

CED/tb

Enclosure(s)

cc Health Department
Mayor's Office
Regional Field Office
Ed Bonanno, DCJ
Joel Golumbek, USEPA Region II



State of New Jersey

Christine Todd Whitman
Governor

Department of Environmental Protection

Robert C. Shinn, Jr.
Commissioner

APR 19 1996

IN THE MATTER OF :
CLEAN VENTURE INCORPORATED : NOTICE OF CIVIL
201 SOUTH FIRST STREET : ADMINISTRATIVE
ELIZABETH, NJ 07206 : PENALTY ASSESSMENT

This Notice of Civil Administrative Penalty Assessment is issued pursuant to the authority vested in the Commissioner of the New Jersey Department of Environmental Protection (hereinafter "NJDEP" or the "Department") by N.J.S.A. 13:1D-1 et seq., and the Solid Waste Management Act, N.J.S.A. 13:1E-1 et seq. and duly delegated pursuant to N.J.S.A. 13:1B-4.

FINDINGS

1. a. The Department has determined that Clean Venture Incorporated (hereinafter "Clean Venture") is a transporter of hazardous waste (EPA ID# NJ 0000027193) as defined in N.J.A.C. 7:26-1.4, with a principal business address of 201 South First Street, Elizabeth, New Jersey. Clean Venture also owns and operates a truck parking and staging facility located at 226-304 South First Street, Elizabeth, New Jersey.

b. The Department has also determined that, prior to February 8, 1995, Clean Venture, under EPA ID# NJD 982281016, had as a principal business address 1160 State Street, Perth Amboy, New Jersey. Clean Venture owned and operated the same truck parking and staging facility located at 226-304 South First Street, Elizabeth at that time as well.
2. On April 21, 1994, during an inspection by Department personnel at the Clean Venture site in Elizabeth, New Jersey of a loaded dump trailer suspected of leaking waste (Merola truck #217, bearing NJ hazardous waste decal #54898), the following violations were observed:

- a. Clean Venture failed to allow an authorized Department representative access to a waste hauling vehicle. Specifically, during the investigation, company personnel refused to allow any approach to the vehicle or to furnish any information on the source or nature of its contents, when in fact the vehicle was under the control of Clean Venture, as documented by the listing of Clean Venture as Transporter #1 on the accompanying manifest MI 3696133, in violation of N.J.A.C. 7:26-7.5(e).
 - b. Clean Venture failed to allow immediate, lawful entry and inspection by an authorized Department representative. Specifically, during the incident, company personnel instructed the investigator to leave the Clean Venture property before any attempt was made to ascertain the source or extent of a leak that was observed on Merola truck #217 or take any corrective measures to fix it, and refused to furnish any information as to what Merola truck #217 contained or who was responsible for it, in violation of N.J.A.C. 7:26-5.7.
4. Based on the facts set forth in these FINDINGS, the Department has determined that Clean Venture has violated the Solid Waste Management Act, N.J.S.A. 13:1E-1 et seq. and the regulations promulgated pursuant thereto, N.J.A.C. 7:26-1 et seq., specifically N.J.A.C. 7:26-7.5(e) and -5.7.

NOTICE OF CIVIL ADMINISTRATIVE PENALTY ASSESSMENT

5. Pursuant to N.J.S.A. 13:1E-9e and N.J.A.C. 7:26-5.4(f), and based upon the above FINDINGS, the Department has determined that a civil administrative penalty be assessed against Clean Venture in the amount of \$8000. The Department's basis for this Civil Administrative Penalty is set forth in the Penalty Assessment Worksheet(s) attached hereto and incorporated herein as Attachment A.
6. Payment of the penalty is due when a final order is issued by the Commissioner subsequent to a hearing, if any, or when this Notice of Civil Administrative Penalty Assessment becomes a final order (see following paragraph). Payment shall be made by certified check payable to "Treasurer, State of New Jersey" and shall be submitted with the white copy of Form DEP-062A (copy attached) to:
- New Jersey Department of Environmental Protection
Division of Financial Management Planning and
General Services
Bureau of Revenue
CN 417
Trenton, NJ 08625-0417
7. If no request for a hearing is received within twenty (20) calendar days from receipt of this Notice of Civil Administrative Penalty

Assessment, it shall become a final order upon the twenty-first calendar day following its receipt and the penalty shall then be due and payable.

NOTICE OF RIGHT TO A HEARING

8. Pursuant to N.J.S.A. 52:14B-1 et seq. and N.J.S.A. 13: 1E-9, Clean Venture is entitled to an administrative hearing. Any hearing request, along with the enclosed **ADMINISTRATIVE HEARING REQUEST CHECKLIST AND TRACKING FORM FOR ENFORCEMENT DOCUMENTS**, shall be delivered to the addresses below within twenty (20) calendar days from receipt of this Notice of Civil Administrative Penalty Assessment.
 - (i) Office of Legal Affairs
Attn: Adjudicatory Hearing Requests
New Jersey Department of Environmental Protection
CN 402
Trenton, NJ 08625-0402
 - (ii) New Jersey Department of Environmental Protection
Solid and Hazardous Waste Enforcement
Bureau of Hazardous Waste Enforcement - Metro
2 Babcock Pl.
W. Orange, NJ 07052-5504
Attention: Jeffrey A. Sterling, Acting Section Chief
9. Pursuant to N.J.A.C. 7:26-5.3 Clean Venture shall, in its request for a hearing, furnish NJDEP with the following:
 - a. The name, address, telephone number and EPA Identification Number (if applicable) of Clean Venture and its authorized representative;
 - b. Clean Venture's defenses, to each of the Department's findings of fact in the findings section of the notice of civil administrative penalty assessment, stated in short and plain terms;
 - c. An admission or denial of each of the Department's findings of fact in the findings section of the notice of civil administrative penalty assessment. If Clean Venture is without knowledge or information sufficient to form a belief as to the truth of a finding, Clean Venture shall so state and this shall have the effect of a denial. A denial shall fairly meet the substance of the findings denied. When Clean Venture intends in good faith to deny only a part or a qualification of a finding, Clean Venture shall specify so much of it as is true and material and deny only the remainder. Clean Venture may not generally deny all of

the findings but shall make all denials as specific denials of designated findings. For each finding which Clean Venture denies, Clean Venture shall allege the fact or facts as Clean Venture believes such fact or facts to be;

- d. Information supporting the request and specific reference to or copies of all written documents relied upon to support the request;
- e. An estimate of the time required for the hearing (in days and/or hours); and
- f. A request, if necessary, for a barrier-free hearing location for physically disabled persons.

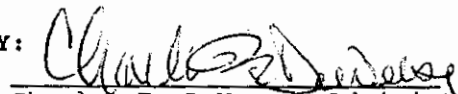
GENERAL PROVISIONS

- 10. Neither the issuance of this Notice of Civil Administrative Penalty Assessment nor anything contained herein shall relieve Clean Venture of the obligation to comply with all applicable laws, including but not limited to the statutes and rules cited herein.
- 11. This Notice of Civil Administrative Penalty Assessment is binding on Clean Venture, its agents, successors, assigns, any trustee in bankruptcy or other trustee, and any receiver appointed through a proceeding in law or equity.
- 12. Notice is given that violations of any statutes, rules or permits other than those herein cited may be cause for additional enforcement actions, either administrative or judicial. By issuing this Notice of Civil Administrative Penalty Assessment the Department does not waive its right to initiate additional enforcement actions.
- 13. Obligations and penalties of this Notice of Civil Administrative Penalty Assessment are imposed pursuant to the police powers of the State of New Jersey for the enforcement of the law and the protection of the public health, Safety, and welfare and are not intended to constitute debt or debts which may be limited or discharged in a bankruptcy proceeding.
- 14. Notice is given that pursuant to N.J.S.A. 13:1E-9e, the Department is authorized to assess a civil administrative penalty of not more than \$50,000 for each violation, and each day during which the violation continues constitutes an additional, separate and distinct offense.
- 15. Notice is further given that any person who violates the provisions of N.J.S.A. 13:1E-1 et seq. or any code, rule, or regulation promulgated pursuant thereto shall be liable to a penalty of not

more than \$50,000 per day to be collected in a civil action, and any person who violates an administrative order issued pursuant to N.J.S.A. 13:1E-9c or a court order issued pursuant to N.J.S.A. 13:1E-9d, or who fails to pay a civil administrative penalty assessed pursuant to N.J.S.A. 13:1E-9e in full after it is due is subject upon order of a court to a civil penalty not to exceed \$100,000 per day of such violations.

DEPARTMENT OF ENVIRONMENTAL
PROTECTION

BY:



Charles E. DeWeese, Administrator
Solid and Hazardous Waste Enforcement

CED/tb

ATTACHMENT A

PENALTY ASSESSMENT WORKSHEET

Violator Name: CLEAN VENTURE INCORPORATEDLocation: 201 SOUTH FIRST STREET, ELIZABETH, NJCase #: NJ 0000027193 Inspector: THOMAS BRADYDate of Violation: APRIL 21, 1994 Page 1 of 2Rule violated as listed in N.J.A.C.
7:26-5.4(g)7 through 12.7.5(e)Base penalty for rule violated as listed
in N.J.A.C. 7:26-5.4(g)7 through 12.\$5000

Number of days/violations

1

Total Base Penalty

\$5000If subparagraph (f)3i applies:
Total base penalty x 1.00N/AIf subparagraph (f)3ii applies:
Total base penalty x 0.50N/AIf subparagraph (f)3iii applies:
Total base penalty x 0.50N/AIf subparagraph (f)3iv applies:
Total base penalty x 0.25N/A

Total Civil Administrative Penalty

\$5000

Justification for Severity Factor Adjustments:

Prepared by: THOMAS BRADY

ATTACHMENT A

PENALTY ASSESSMENT WORKSHEET

Violator Name: CLEAN VENTURE INCORPORATEDLocation: 201 SOUTH FIRST STREET, ELIZABETH, NJCase #: NJ 0000027193 Inspector: THOMAS BRADYDate of Violation: APRIL 21, 1994 Page 2 of 2Rule violated as listed in N.J.A.C.
7:26.5.7(c)2Base penalty for rule violated as listed
in N.J.A.C. 7:26-5.7.\$3000

Number of days/violations

1

Total Base Penalty

\$3000

Total Civil Administrative Penalty

\$3000

Justification for Severity Factor Adjustments:

Prepared by: THOMAS BRADY

**Administrative Hearing Request Checklist
and Tracking Form for Enforcement Documents**

I. Enforcement Document Being Appealed:

Title of Enforcement Document

Issuance Date of Enforcement Document

Document Number (if any)

II. Person Requesting Hearing:

Name

Name of Attorney, if applicable

Address

Address of Attorney

III. Please Include the Following Information as Part of Your Request:

- A. The date the alleged violator received the enforcement document being contested;
- B. A copy of the Enforcement Document and a list of all issues being appealed;
- C. An admission or denial of each of the findings of fact, or a statement of insufficient knowledge;
- D. The defenses to each of the findings of fact in the enforcement document;
- E. Information supporting the request;
- F. An estimate of the time required for the hearing;
- G. A request, if necessary, for a barrier-free hearing location for physically disabled persons;
- H. A clear indication of any willingness to negotiate a settlement with the Department prior to the Department's processing of your hearing request to the Office of Administrative Law; and
- I. This form, completed, signed and dated with all of the information listed above, including attachments, to:
 - 1. Office of Legal Affairs
ATTENTION: Adjudicatory Hearing Requests
Department of Environmental Protection and Energy
401 East State Street
CN 402, Trenton, New Jersey 08625-0402
 - 2. Peter T. Lynch, Chief, Metro Bureau,
2 Babcock Place,
West Orange, NJ 07052 - (With Attachments)
 - 3. All co-permittees (w/attachments)

IV. Signature: _____

Date: _____



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

03/02/98

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJ0000027193

FACILITY NAME -> CLEAN VENTURE INC

MAILING ADDRESS -> 201 S 1ST ST
ELIZABETH, NJ 07206

INSTALLATION ADDRESS -> 201 S 1ST ST
ELIZABETH, NJ 07206

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: PERSICO, MICHEAL
PRESIDENT
CLEAN VENTURE INC
201 S 1ST ST
ELIZABETH, NJ 07206

RCRARep Handler Detail Report

Report run on: October 10, 2014 10:17 AM

Facility Information

ID / Dist	Name / Location Address ...	County	Regulated Activity
NJ0000027193	CLEAN VENTURE INC		
CENTRAL	201 S FIRST ST		LG UO -----
	ELIZABETH NJ 07206	UNION	

Current Federal Activities

- Hazardous Waste Large Quantity Generator
- Hazardous Waste Transporter
- Used Oil Transporter

Other State Interests

-State This option is not active

Sources Overwritten Prior to 2001 (before RCRA kept history for activity/address/contact)

- 10/17/07 N Notification
- 10/16/07 I State/EPA
- 01/01/06 I State/EPA
- 03/29/01 R 99 Biennial
- 12/23/97 N Notification

Extract Flag

All data for this Handler is released to the Public (except any enforcement-sensitive CME data)

Activity Location

Handler Module Data for NJ State only

Location Address

10/17/07 Notification	201 S FIRST ST	
	UNION	(NJ039)
	ELIZABETH, NJ 07206	
	State District: CENTRAL	
	Land Type: Private (P)	
01/01/06 State/EPA	201 S 1ST ST	
	UNION	(NJ039)
	ELIZABETH, NJ 07206	
	State District: CENTRAL	
	Land Type: Private (P)	
03/29/01 99 Biennial	201 S 1ST ST	
	UNION	(NJ039)
	ELIZABETH, NJ 07206	
	State District: CENTRAL	
	Land Type: ()	
12/23/97 Notification	201 S 1ST ST	
	UNION	(NJ039)
	ELIZABETH, NJ 07206	
	State District: CENTRAL	
	Land Type: Private (P)	

North American Industrial Classification (NAICS)

10/17/07 Notification	48423	56291
03/29/01 99 Biennial	336999	

RCRAREp Handler Detail Report

Report run on: October 10, 2014 10:17 AM

NJ0000027193

North American Industrial Classification (NAICS)

336999 ALL OTHER TRANSPORTATION EQUIPMENT MANUFACTURING
48423 SPECIALIZED FREIGHT (EXCEPT USED GOODS) TRUCKING, LONG-DISTANCE
56291 REMEDIATION SERVICES

Mailing Address

10/17/07 Notification 201 S FIRST ST
ELIZABETH, NJ 07206
01/01/06 State/EPA 201 S 1ST ST
ELIZABETH, NJ 07206
03/29/01 99 Biennial 201 S 1ST ST
ELIZABETH, NJ 07206
12/23/97 Notification 201 S 1ST ST
ELIZABETH, NJ 07206

Contact

10/17/07 Notification RUTH A OSOLIN
201 S FIRST ST
ELIZABETH, NJ 07206
Phone: (908)355-5800 237
eMail: RUTH.OSOLIN@CLEANVENTURE.COM
03/29/01 99 Biennial RUTH OSOLIN
Phone: (908)355-5800 237
12/23/97 Notification MICHEAL PERSICO
201 S 1ST ST
ELIZABETH, NJ 07206
Phone: (908)355-5800

Legal Owner/Operator of Site

10/17/07 Notification Current Owner from 05/01/1995 -
CLEAN VENTURE INC (Private)
12/23/97 Notification Current Owner from -
201 SOUTH FIRST STREET CORP (Private)
201 S 1ST ST
ELIZABETH, NJ 07206
Phone: (905)355-5800

Regulated Hazardous Waste Activities

10/17/07 Notification
Federal Conditionally Exempt SQG
State This option is not active
Transporter of RCRA Hazardous Waste
Used Oil Transporter
10/16/07 State/EPA
Federal Large Quantity Generator
State This option is not active

RCRAREp Handler Detail Report

Report run on: October 10, 2014 10:17 AM

NJ00000027193

Regulated Hazardous Waste Activities

Transporter of RCRA Hazardous Waste
Used Oil Transporter
01/01/06 State/EPA
Federal Large Quantity Generator
State Replaces a Null value not allowed to reload via CDX.
Transporter of RCRA Hazardous Waste
No Used Oil Transport
03/29/01 99 Biennial
Federal Large Quantity Generator
No RCRA Transport
No Used Oil Transport
12/23/97 Notification
Federal Not a Generator
Transporter of RCRA Hazardous Waste
No Used Oil Transport

Waste Codes

10/17/07 Notification	D001	D002	D004	D005	D006	D008	D009	F003
01/01/06 State/EPA	NONE							
12/23/97 Notification	NONE							

D001	IGNITABLE WASTE
D002	CORROSIVE WASTE
D004	ARSENIC
D005	BARIUM
D006	CADMIUM
D008	LEAD
D009	MERCURY
F003	THE FOLLOWING SPENT NONHALOGENATED SOLVENTS: XYLENE, ACETONE, ETHYL ACETATE , ETHYL BENZENE, ETHYL ETHER, METHYL ISOBUTYL KETONE, N-BUTYL ALCOHOL, CYCL OHEXANONE, AND METHANOL; ALL SPENT SOLVENT MIXTURES/BLENDS CONTAINING, BEFO RE USE, ONLY THE ABOVE SPENT NONHALOGENATED SOLVENTS; AND ALL SPENT SOLVENT MIXTURES/BLENDS CONTAINING, BEFORE USE, ONE OR MORE OF THE ABOVE NONHALOGE NATED SOLVENTS, AND A TOTAL OF TEN PERCENT OR MORE (BY VOLUME) OF ONE OR MO RE OF THOSE SOLVENTS LISTED IN F001, F002, F004, AND F005; AND STILL BOTTOM S FROM THE RECOVERY OF THESE SPENT SOLVENTS AND SPENT SOLVENT MIXTURES.
NONE	DESCRIPTION

Certification

10/17/07 Notification	BRANCH MGR RUTH OSALIN Signed: 10/16/07
10/16/07 State/EPA	BRS-MANIFEST MASS UPDATE Signed: 10/16/07
01/01/06 State/EPA	BRS CYCLES 2001 2003 2005 BRS 2001 2003 2005 Signed: 01/01/06
03/29/01 99 Biennial	BRANCH MGR RUTH OSOLIN Signed: 03/29/01

RCRARep Handler Detail Report

Report run on: October 10, 2014 10:17 AM

NJ00000027193

Biennial Reports Included/Excluded in Reports

03/29/01 99 Biennial Site probably included in 1999 BR National report.